

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

| FOR | NUMBER FILED | NUMBER EXTRA |
|----------------------------------|--------------------|--------------|
| BASIC FEE | | |
| TOTAL CLAIMS | 72 minus 20 = * 52 | |
| INDEPENDENT CLAIMS | 9 minus 3 = * 6 | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | |

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY
TYPE

OR
OTHER THAN
SMALL ENTITY

| RATE | FEES | RATE | FEES |
|--------|--------|----------|--------|
| | 380.00 | OR | 760.00 |
| X\$ 9= | 468 | OR | X\$18= |
| X39= | 232 | OR | X78= |
| +130= | 130 | OR | +260= |
| TOTAL | 1213 | OR TOTAL | |

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

| AMENDMENT A | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | * 83 | Minus | ** 79 | = 4 |
| Independent | * 22 | Minus | *** 9 | = 13 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
|------------------|-------------------|------------------|-------------------|
| X\$ 9= | 36 | OR X\$18= | |
| X39= | 507 | OR X78= | |
| +130= | | OR +260= | |
| TOTAL ADDIT. FEE | | TOTAL ADDIT. FEE | |

| AMENDMENT B | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | * 85 | Minus | ** 83 | = 2 |
| Independent | * 24 | Minus | *** 22 | = 2 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

RATE
ADDITIONAL
FEE

RATE
ADDITIONAL
FEE

RATE
ADDITIONAL
FEE

RATE
ADDITIONAL
FEE

| AMENDMENT C | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|-------|---|------------------|
| Total | * .. | Minus | ** .. | = .. |
| Independent | * .. | Minus | *** .. | = .. |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | |

RATE
ADDITIONAL
FEE

RATE
ADDITIONAL
FEE

RATE
ADDITIONAL
FEE

RATE
ADDITIONAL
FEE

- * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.